

- (Ed.), *Older men's lives* (pp. 1-21). Thousand Oaks, CA: Sage.
- Thornhill, R., & Palmer, C. T. (2000). *A natural history of rape: Biological bases of sexual coercion*. Cambridge, MA: The MIT Press.
- Toombs, S. K. (2001). The lived experience of disability. In J. R. Johnston (Ed.), *The American body in context* (pp. 31-48). Wilmington, DE: Scholarly Resources Books.
- Udry, J. R. (2000). Biological limits of gender construction. *American Sociological Review*, 65(3), 443-457.
- Udry, J. R. (2001). Reply: Feminist critics uncover determinism, positivism, and antiquated theory. *American Sociological Review*, 66(4), 611-618.
- West, C., & Zimmerman, D. H. (1987). Doing gender. *Gender & Society*, 1, 125-151.
- Whipple, J. (1987). Circumcision: A conspiracy of silence. In F. Abbott (Ed.), *New men, new minds: Breaking male tradition* (pp. 110-113). Freedom, CA: The Crossing Press.
- Williams, S. J., & Bendelow, G. (1998). *The lived body: Sociological themes, embodied issues*. London: Routledge.
- Williams, W. L. (1986). *The spirit and the flesh: Sexual diversity in American Indian culture*. Boston: Beacon.
- Zola, I. K. (1982). *Missing pieces: A chronicle of living with a disability*. Philadelphia: Temple University Press.

## 22

## TRANSGENDERING, MEN, AND MASCULINITIES

RICHARD EKINS

DAVE KING

*In 1961 Lou Sullivan was a 10-year-old girl living in the suburbs of Milwaukee, Wisconsin; in 1991 he was a gay man dying of AIDS in San Francisco.*

—Stryker (1999, p. 62)

*As I grew older my conflict became more explicit to me, and I began to feel that I was living a falsehood. I was in masquerade, my female reality, which I had no words to define, clothed in a male pretence.*

—Morris (1974, p. 16)

*"For every woman who burned her bra, there is a man ready to wear one," says Veronica Vera, who founded Miss Vera's Finishing School for Boys Who Want to Be Girls in 1992 as a resource for the estimated three to five percent of the adult male population that feels the need, at least occasionally, to dress in women's clothing.*

—Miss Vera's Finishing School for Boys Who Want to Be Girls (n.d., 2)

*"Have you ever wanted to dress as a man, try on a male guise and enter the male domain?" asks Torr in the ads for her "Drag King For A Day" workshops. A stream of housewives, artists, straight, lesbian, young and old, sign up for Torr's classes. The first thing Torr tells them, is to "stop apologising," then over one afternoon they learn how to construct a penis, bind their breasts, sit with their legs open and "take up space." They then have to go to a bar to put it all into practice.*

—Cooper (1998)

These fragments, chosen fairly randomly, illustrate a little (but only a very little) of the complex and diverse nature of the human experiences that today are considered together under the heading of "transgender." Although this term has been used in other ways

(Ekins & King, 1999, p. 581), transgender is most commonly used today in the extensive sense of Thom and More (1998): to encompass "the community of all self identified cross gender people whether intersex, transsexual men and women, cross dressers, drag kings

and drag queens, transgenderists, androgynous, bi-gendered, third gendered or as yet unnamed gender gifted people" (p. 3). Until recently, a sharp distinction was made between transvestites, transsexuals, and others whose bodies appeared to be consonant with their assigned sex, and those people who were born with intersexed bodies, as in the encompassing definition of Thom and More (1998), are often included—and sometimes include themselves—under the umbrella term of transgender, especially where the term "transgender" has a transgressive connotation.

In addition to emphasizing diversity, the concept of "transgender," emerging out of the transgender community itself, has avoided assumptions of pathology inherent in the discourse of transvestism, transsexualism, gender identity disorder, and gender dysphoria generated by the medical profession. It also allows consideration of a range of transgender phenomena that have not been subjected to the medical gaze.

We prefer the gerund "transgendering" because of its focus not on *types* of people but on social *process*. Transgendering refers to the idea of moving across (transferring) from one preexisting gender category to the other (either temporarily or permanently), to the idea of living in between genders, and to the idea of transcending or living "beyond gender" altogether (Ekins & King, 1999, 2001b). In the context of this book, it is most usefully viewed as a social process in which males *renounce* or *suspend* the masculinity that is expected of them and females (unexpectedly) *embrace* it.

In the mid-1970s, when we began to research this area, the literature was comparatively small and we could be reasonably confident that we were at least aware of it all. The relevant sections in Bullough, Dorr Legg, Elcano, and Kepner's bibliography (1976) contain about 450 references. More recent bibliographies demonstrate the growth in the literature since that time. Demeyere's (1992) bibliography, particularly strong on anthropological material, and Denny's (1994) bibliography, particularly strong on medical and psychological literature, each include more than 5,000 entries. The growth in the literature since 1994 has been rapid.

Not only has the literature increased in size, but it also now ranges across a large number of disciplines and fields of study. In the mid-1970s,

the bulk of the literature came from medicine and psychology. Now, although these disciplines are still dominant, much can also be found coming from sociology (Devor, 1997; Ekins, 1997; King, 1993), social anthropology (Ramer, 1996), social history (Meyerowitz, 2002), law (Sharpe, 2002), lesbian and gay studies (Prosser, 1997), women's studies (Maitland, 1986), and (especially in recent years) cultural studies (Garber, 1992). In addition, transgender topics appear regularly in the popular media, on television, in the cinema, in the press, and, of course, on the Internet. There are transgender plays and novels, there is transgender photography, and there is transgender art and transgender pornography. Trans people themselves have written their autobiographies, formed organizations, and produced magazines, bulletins, and guides to and celebrations of the topic. During the 1990s, in particular, a number of openly trans people made significant contributions to the academic literature (e.g., More & Whittle, 1999).

In all this material, concepts of masculinity and femininity and what it means to be a man or woman are omnipresent but usually taken for granted. Often, the transgender literature makes sense only against an implicit backdrop composed of prevailing stereotypes of masculinity and femininity and related conceptions of what it means to be a man or woman. Only sometimes is the searchlight turned onto this backdrop. Similarly, although there are occasional references to transgender in the masculinity literature (Connell, 1995; Petersen, 1998), this latter literature has largely ignored the area of transgender.

It is not possible in a single chapter to cover all aspects of transgendering, and here our focus is on transgenderism in contemporary Western societies, which has been the focus of the bulk of the academic literature. It is within this literature that the conceptual apparatus of transvestite, transsexual, and transgender has originated. A small but growing literature does, however, exist on "transgender"-related phenomena in non-Western cultures. Most of this has focused on North American indigenous cultures (see Fulton & Anderson, 1992; Jacobs, Thomas, & Lang, 1997; Whitehead, 1981), although there is work on other cultures (Nanda, 1988; Ramet, 1996; Totman, 2003; Wikan, 1977; Young, 2000). Recently, there has been a surge of anthropological interest in transgender, principally in Southeast Asia (Jackson & Sullivan, 1999;

Johnson, 1997) and in South America (Kulick, 1998a, 1998b). Western medicine assumes that, in its conceptualizations of gender disorders, it is discovering the "truth" of such phenomena, and it has tended to use the anthropological literature to illustrate the universality of the "conditions" (e.g., Steiner, 1985). Recent transgender theorists (e.g., Cromwell, 1999; Feinberg, 1996) have used the same literature to emphasize the diversity and cultural specificity of gender categories, an approach that is more in keeping with the anthropological literature itself, which has often focused on the idea of an institutionalized "third" gender or liminal gender space, anticipating in many ways some of the concepts common in contemporary transgender theory. Nevertheless, it is also evident that Western discourses of transgenderism have been exported to many parts of the world and are usurping or are heavily influencing more traditional notions of gender and "transgender" phenomena (Teh, 2001; Winter, 2002; Winter & Udomsak, 2002).

In this chapter, we have chosen to take a historical and chronological approach and focus on four very influential perspectives on the topic and discuss their conceptions of and implications for masculinity (and usually of and for femininity, too). The first of these perspectives to emerge, and the one that in many ways is still dominant, is that of medicine, although it is not articulated only by those who are medically qualified. The second perspective was first articulated by self-identified "transvestites" as they sought to provide their own voice for their own experiences and began to form their own subcultural groupings. The third perspective, articulated by a number of feminist gender theorists, consisted of major critiques of both the medicalization of gender roles and what they saw as the male-to-female transsexuals' and transvestites' "masculinist" appropriation of "femaleness" and "femininity." Finally, we look at the emergence, at the end of the 20th century, of a late modern/postmodern approach within which emphasis is placed on transgender diversity, fluidity, and moving beyond the rigidities of the binary gender divide, to celebrate new combinations of masculinity and femininity. Here, the predominant voice is that of activists who identify as transgendered.

The theme of the relationship of masculinity and femininity to male and female runs throughout the history of these four perspectives. All forms of transgendering potentially raise

questions about the fundamental cultural assumptions (a) that "normal" men do (and should) have male bodies, and do (and should) display an appropriate amount of masculinity; and (b) that "normal" women do (and should) have female bodies, and do (and should) display an appropriate amount of femininity. Masculinity or femininity without the appropriate "accompaniments" is then often depicted as "not real." Another theme is that of identity. Throughout the history of the phenomenon of transgender, the paramount concern has been "What am I?" or "What is he/she?" in gender terms. In our review of the four major approaches, we will highlight these themes.

#### MEDICAL DISCOURSE, PATHOLOGY, AND "RENOUNCING" MASCULINITY

The original emphasis within this approach is on male-to-female, as opposed to female-to-male, transgender. This has remained so until recently. The dominant voice within this perspective came to be on males who wish to "renounce" their masculinity and "embrace" femininity permanently. In the period prior to technologies that enabled "sex change" reassignment, the focus was on a medical discourse that considered the "reality" of men's appropriation of femininity. Could a "real" man embrace the "feminine"? From the 1950s onward, when "sex change" surgery became a practical possibility, the focus shifted to enabling—in selected cases—the renouncing of male bodies, along with such manliness and masculinity that "transsexuals" may have acquired. The "real reality" of what now came to be conceptualized as psychological sex—"gender identity"—was privileged over the "apparent reality" of the body—morphological sex. The modern "transsexual" was "invented."

Although it is possible to cite examples of the phenomenon of transgender throughout human history, the roots of our modern conception of transgenderism are to be found in the latter half of the 19th century. This period saw the beginning of what Foucault terms the "medicalisation of the sexually peculiar" (Foucault, 1979, p. 44). It was during this period that psychiatrists and other medical practitioners began to puzzle over the nature of people who reported that they felt like/dressed as/behaved like a person of the "opposite sex."

Early manifestations of what later came to be seen as transgenderism were first seen as variations of homosexuality. "Real" men were masculine and heterosexual. Men who were homosexual were not "real men" and often were conceptualized as feminine souls in male bodies. Men who enjoyed behaving and dressing as women or, indeed, wished to be women, simply took the whole business much further! It was Hirschfeld (1910/1991) who coined the term "transvestite" for this latter group. In doing so, he argued that the transvestites' love of the feminine did not make them women. Rather, they were men who enjoyed expressing femininity. Hirschfeld redefined the link between being a man and masculinity. He argued that men (and women) are variously masculine and feminine:

There are men with the gentle emotions of a Marie Baskierschew, with feminine loyalty and modesty, with predominant reproductive gifts, with an almost unconquerable tendency to feminine preoccupations such as cleaning and cooking, also such ones who leave women behind in vanity, coquetry, love of gossip, and cowardice, and there are women who greatly outweigh the average man in energy and generosity, such as Christine of Sweden, in being abstract and having depth, such as Sonja Kowalewska, as many modern women in the women's movement in activity and ambition, who prefer men's games, such as gymnastics and hunting, and surpass the average man in toughness, crudeness, and rashness. There are women who are more suited to a public life; men more to a domestic life. There is not one specific characteristic of a woman that you would not also occasionally find in a man, no manly characteristic not also in a woman. (Hirschfeld, 1910/1991, pp. 222-223)

By implication, male "transvestites" are no less "men." In a similar way, Hirschfeld argued that renouncing masculinity did not necessarily involve homosexuality: "one has to extend the sentence 'not all homosexuals are effeminate' to include 'and not all effeminate men are homosexual'" (1910/1991, p. 148). Later, he wrote that "today we are in a position to say that transvestism is a condition that occurs independently and must be considered separately from any other sexual anomaly" (Hirschfeld, 1938, pp. 188-189). Havelock Ellis also saw what he preferred to call *eonism* (Ellis, 1928) as separate from homosexuality, although he had a more

conventional belief than Hirschfeld in the biologically given and fundamentally different (but complementary) natures of men and women (Ellis, 1914).

Both Hirschfeld and Ellis were broadly supportive of those who would later be distinguished as transvestites and transsexuals (they did not employ the then fashionable language of degeneracy or perversion), but they nevertheless viewed such people as anomalies to be explained within a medical framework. Not surprisingly, given the then "expected" congruity between sex, gender, and heterosexuality, both surmised that the explanation could only be biological.

Ellis's and Hirschfeld's views were not without their critics. Onetime psychoanalyst Stekel (1934), for example, disagreed with the separation from homosexuality and also argued for a psychological explanation.

The implications of these contrasting views became more apparent when, around the middle of the 20th century, a number of technological developments came together that made it possible, by altering the body in more or less limited ways, to grant the wishes of some people to "change sex." The term "transsexual" began to make its appearance in medical and popular vocabularies, and the question of whether (and if so, on what grounds) men should be allowed to renounce and be assisted in renouncing their male bodies (and, to a lesser extent, women their female bodies) came to the fore.

In brief, the arguments have revolved around the perceived "authenticity" or otherwise of the transsexual's masculinity or femininity. On the assumption that authentic masculinity and femininity are rooted in the body, claims of biological origins have been and are used to prove the transsexual's entitlement to renounce his or her assigned sex. Claims of psychopathology have been used to deny any such entitlement.

During the 1950s, a new conception began to develop that provided a somewhat different argument in favor of bodily intervention. This was the separation of sex from gender. Stoller (1968) put it in this way:

*Gender* is a term that has psychological or cultural rather than biological connotations. If the proper terms for sex are "male" and "female," the corresponding terms for gender are "masculine" and "feminine"; these latter may be quite independent of (biological) sex. (p. 9)

In addition to stressing the independence of sex and gender, the writings of Money (1973), Stoller, and others also stressed the immutability of the latter when conceptualized as "gender identity." What became referred to as "core gender identity" (Stoller, 1977) was regarded as unalterable after the age of 2 or 3, thus attaining a degree of "reality" comparable to that of the body. On this conception, therefore, it became possible to be both a male and a man in terms of the body and a female and a woman in terms of the psyche or, indeed, vice versa. Thus, Benjamin gave his male-to-female transsexual patients a certificate that contained the following sentences: "Their anatomical sex, that is to say, the body, is male. Their psychological sex, that is to say, the mind, is female" (Benjamin, 1966, p. 66). Despite the separation, there was still an assumption that, as Stoller put it, "masculinity fits well with maleness and femininity goes with femaleness" (1977, p. 173) so that if a "fully differentiated gender identity" is immutable, it makes sense to achieve harmony by altering the body to the extent that technological developments allow. Money and Tucker write of the transsexual as

a person whose sex organs differentiated as male and whose gender identity differentiated as female. Medical science has found ways to reduce the incompatibility by modifying anatomy to help that person achieve unity as a member of a sex . . . but medical science has not yet found a way to modify a fully differentiated gender identity. (Money & Tucker, 1977, pp. 69-70)

Although not entirely without controversy, the hormonal and surgical renunciation of maleness and masculinity and femaleness and femininity has become accepted in many Western countries, and elsewhere it no longer seems to require continual justification. Although gender identity has continued to take priority over morphological sex, the search is still on for what is assumed will be a biological determinant of the sexed brain. A document titled *Transsexualism: The Current Medical Viewpoint*, written for the main United Kingdom campaigning organization by a group of medical specialists, claims that

the weight of current scientific evidence suggests a biologically-based, multifactorial aetiology for transsexualism. Most recently, for example, a study identified a region in the hypothalamus of

the brain which is markedly smaller in women than in men. The brains of transsexual women examined in this study show a similar brain development to that of other women. (Press for Change, 1996, "Aetiology")

Opponents of bodily modification have tended to argue that the transsexual does not have an "opposite gender identity" but instead is suffering from some form of psychic disturbance. This argument is orthodox among those many psychoanalysts, for instance, who consider that "healthy" development leads toward "mature" heterosexual relationships that presuppose two members of the "opposite" sex who each manifest "healthy" degrees of "masculinity" and "femininity," respectively. Socarides, for instance, is a vociferous exponent of this view:

The fact that the transsexual cannot accept his sex as anatomically outlined . . . is a sign of the intense emotional and mental disturbance which exists within him. It is the emotional disturbance which must be attacked through suitable means by psychotherapy which provides alleviation of anxiety and psychological retraining rather than amputation or surgery. (Socarides, 1969, p. 1424)

According to this view, the gender identity and role that is seen to be at variance with biological sex must be a sham, an imitation of the "real thing." Socarides (1975), for example, wrote of "behaviour imitative of that of the opposite sex" (p. 131) and a "caricature of femininity" (p. 134). Like the supporters of surgery, its opponents tend to employ traditional stereotypes of gender identity and roles. Ostow argued that in the case described by Hamburger, Stürup, and Dahl-Iversen (1953), there was "no desire for sexual relations with men" and "no evidence of any maternal interest" (Ostow, 1953, p. 1553). Meyer and Hoopes (1974) have similarly argued that

a true feminine identification, for instance, would result in warm and continued relationships with men, a sense of maternity, interest in caring for children, and the capacity to work productively and continuously in female occupations. . . . The adult "transsexual" reaches accommodation with a simulated femininity or masculinity at a sacrifice in total personality. (p. 447)

The medical approach has facilitated some degree of migration (Ekins & King, 1999) from one sex (body) to the other, but it retains a view

of sex, sexuality, and gender as binary and has, on the whole, accepted existing stereotypes of what constitutes masculinity and femininity and their linkages to male and female bodies. Thus, in the absence of a "test" that will unequivocally demonstrate that a person is a transsexual, suitability for hormone and (especially) surgical "sex change" is determined by the extent to which the candidate "passes" or demonstrates sufficient masculinity or femininity, as the case may be. Some critics (and some of the candidates themselves) have complained that the conceptions of masculinity and femininity that the medical profession has employed in this respect have become outmoded and are out of step with notions of masculinity and femininity in "the real world."

The second approach that we consider in the following section also makes use of traditional stereotypes, but it loosens the linkage between sex and gender to a greater extent than the medical approach. As with the bulk of the medical literature on transsexuality, there tends to be a downplaying of the details of transgender sexuality (eroticism) and the relations between "masculine" and "feminine" sexuality, as opposed to the details of sex (the body) and gender (both as identity and as the social and cultural accompaniments of sex).

#### THE TRANSGENDER COMMUNITY, VIRGINIA PRINCE, "FULL PERSONALITY EXPRESSION," AND "SUSPENDING" MASCULINITY

From the early 1960s onward, the voices of transgendered people, themselves, began to be heard outside the medical case histories. The dominant voice within this, our second approach, was of those who sought to avoid medicalization and develop a view of their identities and behaviors in terms of their "suspending" aspects of masculinity for various periods of time, while not renouncing it entirely. Although self-identified transsexual "renouncers" tended to articulate themselves within the developing medical discourse, the "suspenders" sought to develop their own perspective and accompanying concepts of what it meant to be male/masculine and female/feminine. Here, the work of Virginia Prince was particularly influential, and her view that men should

express "the girl within" gained a following in "transvestite" groups throughout the world. For Prince, being a male with a fully developed personality expression entailed embracing "femininity" in various modes, for varying periods of time, and in various spaces and places. Prince was, it may be said, man enough to be a woman. Although Prince, herself, eventually came to live full-time as what she termed a "transgenderist" (a male woman without sex reassignment surgery), her main influence has been in articulating a "transvestite" lifestyle in which males "oscillate" (Ekins & King, 1999, 2001b) between the expression of masculinity and of femininity in the service of "full personality expression."

Although Hirschfeld coined the term "transsexualism" in 1923 (Hirschfeld, 1923; Ekins & King, 2001a), it was not widely used until the 1950s and, at least in the English-speaking world, the term "transvestism" (which he had coined earlier, in 1910) was employed in a very broad sense to denote a diverse range of transgender practices, from what he termed "name transvestism" (the adoption of an opposite-sex name) to full "sex changes." With massive media attention focused on cases of the latter in the early 1950s, medical attention focused on transsexualism, which, as we have seen, achieved a degree of respectability in some quarters.

There was much less interest in the other main transgender practice (transvestism) to come to the notice of the medical profession. This was that of (mainly) men who did not wish to renounce their masculinity permanently but who would sometimes suspend it by cross-dressing and behaving "in a feminine fashion," usually in private but sometimes in public. This compulsion (as it was often experienced) was sometimes troubling enough for some men to seek a "cure." The term "transvestism" came to refer principally to compulsive and sexually arousing cross-dressing, usually by biological males. Because no "cure" was available (despite a brief flurry of interest in the use of aversion therapy in the 1960s), and because (despite the anguish of some transvestites and sometimes their partners) cross-dressing was seen as a relatively harmless "perversion," transvestism was of little interest to most of the medical profession.

So it was left to transvestites themselves to fashion an identity and a script that was more tenable than that on offer by the medical

profession. Central to this was Virginia Prince, who, after struggling to find a cure for her cross-dressing, was encouraged by a psychiatrist to "stop fighting it." Prince went on to fashion a new identity depicting a certain type of cross-dressing supported by an explanatory and justificatory philosophy with which she sought to educate the medical profession and transvestites themselves. In doing so, she provided the basis for the beginnings of what we now call the transgender community.

Prince (1957, p. 82) distinguished between three types of males who may share "the desire to wear feminine attire." These were the homosexual, the transvestite, and the transsexual. Prince then distinguished the homosexual and the transsexual from what she called the "true transvestite" (Prince, 1957, p. 84). The true transvestites are "exclusively heterosexual . . . frequently married and often fathers" (Prince, 1957, p. 84). "They value their male organs and enjoy using them and do not wish them to be removed" (p. 84).

In 1960, Prince published a magazine called *Transvestia* that was sold by subscription and through adult bookshops. The message on the inside cover read: "*Transvestia* is dedicated to the needs of those heterosexual persons who have become aware of their 'other side' and seek to express it." Gradually, Prince developed an organization called the Foundation for Full Personality Expression (FPE or Phi Pi Epsilon) that was clearly aimed at those cross-dressers who, like Prince (at that time), were heterosexual and married—homosexuals and transsexuals were not admitted. This organization was immensely successful and spread to many parts of the world.

By 1967, Prince (writing under the pseudonym "Bruce," 1967) was evidently familiar with the gender terminology and concepts that are taken for granted today. Sex, she points out, is anatomical and physiological; gender is psychosocial. Transvestism, for Prince, is very firmly about gender. She argues that sex, the division into male and female, is something we share with other animals. Gender, the division of masculine and feminine, is, on the other hand, "a human invention" and "not the inevitable result of biological necessity" (Bruce, 1967, p. 129). But in their socialization, children are pushed in one or the other gender direction and, consequently, anything associated with the other

gender has to be suppressed, particularly in the case of males. Transvestism is the expression of this suppressed femininity.

Prince's views on the nature of masculinity and femininity are particularly apparent in her publications aimed at instructing transvestites themselves on how to dress and behave in order to express the woman within. *How to Be a Woman Though Male* (Prince, 1971) is a practical guide for males who wish to be women, and this involves Prince in presenting what looks like a very dated, traditional view of women and men, even for its time. To be masculine is to be active, competitive, strong, logical, and so on; to be feminine is to be the opposite—passive, cooperative, weak, and emotional (Prince, 1971, pp. 115-116). However, she is aware that she is presenting a stereotype of womanhood and writes that she agrees with the feminist criticism of some aspects of it, but she argues that this is how things are, not as they should be, and this is what it takes to be a woman in our culture (Prince, 1971, p. 116).

It is also, we should note, a very middle-class stereotype of femininity: Prince tells her readers, "if you are going to appear in society as a woman, don't just be a woman, be a lady" (Prince, 1971, p. 135); and

it is the best in womanhood that the [transvestite] seeks to emulate, not the common. Be the LADY in the crowd if you are going to be a woman at all, not the scrubwoman or a clerk. It is the beauty, delicacy, grace, loveliness, charm and freedom of expression of the feminine world that you are seeking to experience and enjoy, so "live it up"—be as pretty, charming and graceful as you can . . . (Prince, 1971, p. 136)

Prince's views are important in this context for her insistence on breaking the link between femininity and femaleness, and (implicitly, for she has little to say about this) between masculinity and maleness. The conception of the woman within the man (and presumably the man within the woman) gave a more serious edge to the emerging identity of the transvestite, and the notion of whole persons, both masculine and feminine, does strike a chord with some of the visions of the past 30 or so years.

However, Prince's apparent recognition of the cultural relativity of masculinity and femininity seems at odds with the notion of them emerging "from within" and, ultimately, Prince

herself seems to have found it hard to retain the separation of sex and gender. She wrote in 1979 that "I have had my beard removed by electrolysis and . . . as a result of a course of hormone therapy I now possess a nice pair of 38B breasts" (Prince, 1979, p. 172).

#### FEMINISM, THE "TRANSSEXUAL EMPIRE," AND "REJECTING" MASCULINITY

From the late 1960s, with the emergence of the gay and women's movements, there arose an interest in the political significance of transgenering and its relationship to forms of sexual and gender oppression. From one point of view, "transvestites" and "transsexuals" (the terms in use at the time) were seen as politically conservative, reinforcing gender stereotypes by performing hyperfemininity, for instance. From an alternative standpoint, however, insofar as they broke the congruity between sex and gender, they were seen by some to be radical (e.g., Brake, 1976). However, by far the most influential single political critique of what she termed "the transsexual empire" was that put forward by Janice Raymond. Raymond (1980) argued that the creation by the male medical profession of transsexualism and its "treatment" by means of sex change surgery obscures the political and social sources of the "transsexuals'" suffering. This, then, was the period of influence of feminist transgender theory disposed to "rejecting" men and masculinity. The male-to-female transsexual's claim to womanhood and femininity was rejected, as well as that medical discourse and practice which sought to aid the transsexual's "renouncing" of his masculinity. Raymond saw female-to-male transsexuals as merely "tokens" who had no significance for her argument. In this sense, too, females who wished to "embrace" the masculinity attendant on their sex reassignment surgery were rejected from her considerations.

As we have seen, some medical approaches have accepted the authenticity of a masculine or feminine identity at variance with the body and have given priority to the identity over the body. Prince and the organizations influenced by her philosophy have also recognized an authentic femininity within a male body and presumably would allow an authentic masculinity within a female body. Other approaches from within the medical profession have seen

transvestism and transsexualism unequivocally as psychopathologies and have denied the reality of a gender identity at variance with the evidence of the body.

Although some of these approaches have noted the culturally contingent nature of masculinity and femininity, they have not questioned the content of these categories and have shown little awareness of gender inequality. Yet, in the late 1960s, when sex change surgery had gained a degree of legitimacy as the treatment of choice for those who claimed a gender identity other than that suggested by their bodies and who displayed the appropriate masculinity or femininity, the emerging women's movement was beginning to question just what was appropriate about these categories. The problem that transsexuals posed for the women's movement was this: Who qualifies as a woman?

As the transgender activist Wilchins (1997) was to put it later,

Feminist politics begins with the rather common sense notion that there exists a group of people understood as women whose needs can be politically represented and whose objectives sought through unified action. A movement for women—what could be simpler? But implicit in this is the basic idea that we know who comprises this group since it is their political goals we will articulate. What if this ostensibly simple assumption isn't true? (p. 81)

Although it is not the only feminist position on transsexualism, that of Janice Raymond (1980) is probably the best known. Although it has been subjected to considerable criticism (e.g., Califia, 1997; Riddell, 1996; Wilchins, 1997), its influence can still be found in the work of some writers, such as Jeffreys (1996, 2003). At the heart of Raymond's position is the denial of the legitimacy of the transsexual's "chosen" gender. What she calls "male-to-constructed-females" can never be women because of their lack of both female biology and female life experiences. Raymond asserts:

it is biologically impossible to change chromosomal sex. If chromosomal sex is taken to be the fundamental basis for maleness and femaleness, the male who undergoes sex conversion surgery is not female . . . Transsexuals are not women. They are deviant males. (1980, pp. 10, 183)

Raymond argued that transsexualism is not an individual condition, a personal problem for which changing sex is merely a neutral, technical method of treatment, but instead is a social and political phenomenon. According to her, "transsexuals" are among the victims of patriarchal society and its definitions of masculinity and femininity. By creating transsexualism and treating it by means of sex change, the political and social sources of the "transsexuals'" suffering are obscured. Instead, it is conceptualized as an individual problem for which an individual solution is devised.

Raymond argues that by means of this illegitimate medicalization, the "real" problem remains unaddressed. Medicalization also serves to defuse the revolutionary potential of transsexuals, who are "deprived of an alternative framework in which to view the problem" (1980, p. 124).

She argues that not only does transsexualism reflect the nature of patriarchal society, but it is also ultimately caused by it:

The First Cause, that which sets other causes of transsexualism in motion . . . is a patriarchal society, which generates norms of masculinity and femininity. Uniquely restricted by patriarchy's definitions of masculinity and femininity, the transsexual becomes body-bound by them and merely rejects one and gravitates toward the other. (Raymond, 1980, p. 70)

Thus, we have a circular process by which patriarchy creates, via the family and other structures, problems for individuals that are then dealt with as transsexualism, thus reinforcing the conditions out of which the problems arose.

However, this is primarily a one-way movement, for Raymond sees transsexualism as primarily a male movement. Female-to-male transsexuals are mere tokens created to maintain the illusion that it is a "condition" that affects both sexes. The reason why it is primarily a male problem, says Raymond (1980), is because men are seeking to possess

the power that women have by virtue of female biology. This power, which is evident in giving birth, cannot be reduced to procreation. Rather birthing is only representative of the many levels of creativity that women have exercised in the history of civilization. Transsexualism may be one way by which men attempt to possess female

creative energies, by possessing artifactual female organs. (p. xvi)

In addition, Raymond (1980) sees the creation of transsexualism and sex change surgery as an attempt to replace biological women (p. 140) and argues that "gender identity clinics" where transsexuals are "treated" are prototypical "sex-role control centers" (p. 136). Thus, transsexualism is not merely another example of the pervasive effects of patriarchal attitudes; it actually constitutes an attack on women. "Transsexualism constitutes a sociopolitical program that is undercutting the movement to eradicate sex role stereotyping and oppression in this culture" (p. 5).

Apart from measures directed at the "first cause" itself (patriarchy), Raymond advocates restrictions on "sex change" surgery; the presentation of other, less favorable, views of its consequences in the media; and nonsexist counseling and consciousness-raising groups for transsexuals themselves to enable them to realize their radical potential (1980, appendix).

How much acceptance Raymond's thesis has had is difficult to tell, but it clearly has been widely read and discussed. Stone (1991) writes of Raymond's book that "here in 1991, on the twelfth anniversary of its publication, it is still the definitive statement on transsexualism by a genetic female academic" (p. 281). The position of Raymond and other feminist academics was not merely "academic." In the middle and late 1970s, as Carol Riddell explains (personal communication, 1994),

a small but very active section of the feminist movement, the "Revolutionary Feminists," were taking over some positions in the radical subcultures of extreme feminism. They owed a little intellectually to Mary Daly and her ex-student Janice Raymond, from whose doctoral thesis *The Transsexual Empire* was written. There were reports of threats to transsexuals in London, and I myself was threatened with violence when I attended a Bi-sexuality conference there.

The position was much the same two decades later, when members of the New York City chapter of the activist Transsexual Menace confronted Janice Raymond at the launch of her 1994 edition of *The Transsexual Empire*. Wilchins (1997) has written eloquently of the struggles for male-to-female transsexuals to



gain admittance to "womyn-born womyn only" spaces and the harassment they have suffered at events that ban "non-genetic women" (Wilchins, 1997, p. 110).

#### POSTMODERNITY, "TRANSCENDING," AND BREAKING THE LINK BETWEEN MALES AND MASCULINITY

Finally, we look at the emergence, at the end of the 20th century, of a postmodern approach: the coming of age of transgenderism. Now the emphasis is on transgender diversity, fluidity, and moving beyond the rigidities of the binary gender divide. New combinations of masculinity and femininity are celebrated. Particularly significant, from the standpoint of masculinity, is the concept of female masculinity put forward by Judith "Jack" Halberstam (1998). Whereas the vast majority of the men and masculinities literature concerns itself with variants of masculinity considered in relation to males, Halberstam breaks that link. Furthermore, in a postmodern age, medical technology becomes something to call upon for the purposes of "optional" body modification, as opposed to "diagnosis," treatment, or management of pathology or disorder.

Virginia Prince notwithstanding, the voices of transgendered people: themselves were largely missing from the earlier approaches that we have looked at; they appeared largely as cases in the medical literature or as dupes of the medical profession in the dominant feminist discourses. This was to change radically in the 1990s as a new discourse emerged, constituting a major paradigm shift. A key work in this new approach was Sandy Stone's "The Empire Strikes Back" (1991), in which she argued that "the people who have no voice in this theorizing are the transsexuals themselves. As with males theorizing about women from the beginning of time, theorists of gender have seen transsexuals as possessing something less than agency" (1991, p. 294).

Stone also pointed out that transsexuals had failed to develop a counterdiscourse. It is easy to see why, because the main "traditional" transgender identities have "worked" only to the extent that they have been covert and temporary. The male transvestite who suspends his masculinity for varying amounts of time most usually does not want to be "read" as such. Except within a small subcultural setting, he wishes to be seen as

a "normal" man or (to the extent that he is able to suspend his masculinity in public) as a "normal" woman. Similarly, the male transsexual who is renouncing his masculinity permanently, like the female transsexual who is seeking to embrace it, are also seeking to be read as a woman and a man, respectively. Both identities are also temporary ones; the transvestite oscillates (Ekins & King, 1999, 2001b) between masculinity and femininity; the transsexual passes through a trans phase on the way to a permanent masculine or feminine identity.

Where these identities have become open and/or permanent, they have been seen as pathological and/or problematic. In other words, no permanent "in-between" identity was allowed for. To the extent that the transvestite or transsexual passes as a person of the other gender, and to the extent that the transgendering remains hidden, the "fact" of two invariant genders remains unquestioned. As Stone (1991) put it, "authentic experience is replaced by a particular kind of story, one that supports the old constructed positions" (p. 295). In consequence, Stone argued that transsexuals can develop their own discourse only by recognizing their unique gender position:

For a transsexual, as a transsexual, to generate a true, effective and representational counterdiscourse is to speak from outside the boundaries of gender, beyond the constructed oppositional nodes which have been predefined as the only positions from which discourse is possible. (1991, p. 295)

Stone contended that the dominant binary model of gender and its employment in the category of transsexuality has obscured the diversity of the transsexual experience. It "foreclosed the possibility of analyzing desire and motivational complexity in a manner which adequately describes the multiple contradictions of individual lived experience" (1991, p. 297). What began to happen, in fact, during the 1990s was the recognition of the vast diversity of transgender experiences. Some people did begin questioning "the necessity of passing for typically gendered people" and began to develop new gender identities. For some people, "the experience of crossed or transposed gender is a strong part of their gender identity; being out of the closet is part of that expression" (Nataf, 1996, p. 16).

The following quotation from Denny (1995) underscores the point of diversity:

With the new way of looking at things, suddenly all sorts of options have opened up for transgendered people: living full-time without genital surgery, recreating in one gender role while working in another, identifying as neither gender, or both, blending . . . characteristics of different genders in new and creative ways, identifying as genders and sexes heretofore undreamed of—even designer genitals do not seem beyond reason. (p. 1)

The 1995 International Bill of Gender Rights (reprinted in Feinberg, 1996, pp. 171-175) claims that "all human beings have the right to define their own gender identity" . . . "to free expression of their self-defined gender identity," and to change "their bodies cosmetically, chemically, or surgically, so as to express a self-defined gender identity" (pp. 172-173). Calafia (1997), too, writes of the "individual's right to own his or her own body, and [to] make whatever temporary or permanent changes to that body the individual pleases. . . . A new sort of transgendered person has emerged, one who approaches sex reassignment with the same mindset that they would obtaining a piercing or a tattoo" (p. 224).

However, at the same time as there is an acknowledgment of diversity, there has also developed a greater sense of unity. Writers now comment on the "transgender community," and this is sometimes seen to extend into the gay community (Mackenzie, 1994; Whittle, 1996). Parts of this community have been working more vociferously and more effectively than ever before to end discrimination toward, and claim what are described as the rights of, transgendered people. The emphasis has shifted to the rights of transgendered people as transgendered, and not as members of their "new" gender. A particular focus of this activism has been the advocacy of the right of "gender expression" subversive of masculine/feminine dichotomies as linked to "male" and "female" bodies.

Stone's (1991) chapter can also be seen to provide the starting point for the emergence of transgender theory, which is now seen by some to be at the very cutting edge of debates about sex, sexuality, and gender and has achieved a position of prominence in a number of recent contributions to cultural studies and "queer theory." Stone's image of transsexuals as "outside the boundaries

of gender" chimed in well with many of the themes in cultural studies and queer theory and provided a motif that has been much developed since.

This idea points to the position of trans people as located somewhere outside the spaces customarily offered to men and women, as people who are beyond the laws of gender. So the assumption that there are only two (opposite) genders, with their corresponding "masculinities" and "femininities," is opened up to scrutiny. Instead, it is suggested that there is the possibility of a "third" space outside the gender dichotomy. This idea refers not simply to the addition of another category; it is conceived as "a space for society to articulate and make sense of all its various gendered identities" (Nataf, 1996, p. 57), or, as Herdt (1994) put it, "the third is emblematic of other possible combinations that transcend dimorphism" (p. 20).

Within this approach, the idea of permanent core identities and the idea of gender itself disappear. The emphasis is on transience, fluidity, and performance. Kate Bornstein, for instance, talks about "the ability to freely and knowingly become one or many of a limitless number of genders for any length of time, at any rate of change" (Bornstein, 1994, p. 52). In that gender fluidity recognizes no borders or "laws" of gender, the claim is to live "outside of gender" (Whittle, 1996) as "gender outlaws" (Bornstein, 1994).

Writing at the beginning of the 1990s, Rubin pointed out that "transsexual demographics are changing. FTMs [female-to-males] still comprise a fraction of the transsexual population, but their numbers are growing and awareness of their presence is increasing" (1992, p. 475). Conveniently written off as "tokens" by Raymond, female-to-male transsexuals or, more accurately, female-bodied trans persons, indeed had become a more visible feature of the transgender community by the end of the 20th century and leading into the 21st century. In fact, they have come to play key roles within that community and within transgender politics, and they have been prominent in the emergence of transgender theory (e.g., Cromwell, 1999; Prosser, 1998; Whittle, 1996). More specifically, it is trans men who have led the way in linking transgender to revolutionary socialism (Feinberg, 1996), to radical lesbianism (Nataf, 1996), to radical body configurations and pansexualism (Volcano, 2000), and to the

beginnings of a hitherto neglected transgender approach to class, race, and masculinity (Volcano & Halberstam, 1999). In the main, followers of Raymond such as Jeffreys (1996) have continued to turn a blind eye to the significance of FTMs within the transgender community.

Notably, it is Judith "Jack" Halberstam who has turned the spotlight onto "female masculinity" or "masculinity" without men (Halberstam, 1998), thus avoiding the limitations of seeing masculinity as "a synonym for men and maleness" (Halberstam, 1998, p. 13). Halberstam's main aims are to demonstrate that women historically have contributed to the construction of contemporary masculinity and to underline the diversity of female masculinity, which has been obscured because it challenges "mainstream definitions of male masculinity as non-performative" (Halberstam, 1998, p. 234).

#### CONCLUDING COMMENTS

The "lessons" of transgender for masculinity (and femininity) are complex and often contradictory. They revolve around the nature of and the relationships between sex, gender, and sexuality. The neat binary divisions in each of these areas has given way to diversity, and the simple linkages between them have given way to complexity. Not surprisingly, much academic and popular discussion has been focused on the most dramatic aspect of transgender, that of transsexualism. Against a backdrop of the assumed correlation of sex, gender, and heterosexuality, radical refashioning of the body has been conventionally sanctioned by the medical profession after the demonstration by the "applicant" that the applicant's body is "out of sync" with the applicant's gender and sexuality, thereby restoring harmony. Recent thinking has upset that harmony.

The early attempts by Hirschfeld and Ellis to distinguish transvestism or eonism from homosexuality and Prince's insistence on the gendered nature of transvestism led to an underplaying of the significance of transgendered sexuality. The diversity of transgender sexual experiences evident in the early medical literature was gradually replaced by a "heteronormative" perspective in which those transsexuals who took steps to change their bodies to match their perceived identity on the "opposite" side of the binary

divide, and who took up a heterosexual position from the vantage point of this "opposite" side, were privileged over transgendered people who evidenced other forms of transgender experience. This heteronormative position that privileges heterosexuality, as set within a binary male and female gender divide, over other forms of sexual and gender expression, may be illustrated by Benjamin's (1968) statement:

Transsexuals are attracted only to members of their own anatomical sex; however, they cannot be called homosexual because they feel they belong to the sex opposite to that of the chosen partner. The transsexual man loves another man as a woman does, in spite of his phenotype and in spite of his genital apparatus which he feels he must change. The transsexual woman woos another woman as a man would, feeling herself to be a man regardless of her anatomical structure. (p. 429)

It was not until 1984 that Dorothy Clare coined the term "transhomosexuality" (Clare, 1984) in recognition of the fact that the "transsexual's" renouncing masculinity did not necessarily mean renouncing sexual attraction to women and that embracing masculinity did not necessarily entail embracing women as sexual partners (see also Feinbloom, Fleming, Kijewski, & Schuler, 1976). More recently, through the popularization of the writings of Ray Blanchard (e.g., 1989) by Anne Lawrence (1999) and Michael Bailey (2003) (see Ekins & King, 2001c), the recognition of a sexual motivation for sex reassignment has occurred. This literature highlights the complex interrelations between "masculine" and "feminine" transgendered sexuality insofar as many self-identified male-to-female transsexuals are committed to renouncing many elements of their masculinity, but paradoxically this desire for permanent renunciation derives from a sexuality that is in important respects stereotypically masculine. Significantly, Lawrence (1999) refers to such male-to-female transsexuals as "Men Trapped in Men's Bodies." The key concept here is "autogynephilia" (love of oneself as a woman). As Lawrence puts it (personal communication, 2001), "I renounced a masculine sexed body and for the most part renounced masculine gender behavior, in an attempt to both express and control my (masculine) autogynephilic sexuality. Paradoxically, the control aspect also involved a renunciation of masculine sexuality, at least in part."

Similarly, the straightforward dichotomy of male and female bodies is also breached by recent developments. Transvestites altered their bodies only in temporary or reversible ways; transsexuals were either pre- or post-op, and post-op meant that the body had been reconfigured to resemble as closely as possible the "normal" body that "fitted" the gender identity. The only limits were those imposed by cost or technical limitations. Now some people are not going "all the way" and are choosing to refigure their bodies in ways that are not "standard" male or female. Virginia Prince, radical in some ways and clearly ahead of her time, might not be happy with the sexual implications in the following quotation, but she would otherwise, we feel, approve:

If a man says he loves me, he'd better love all of me. Ain't no part of me that ain't me. Ain't no part of me that's bad. I am an African American heterosexual woman who is transgendered with a penis. . . . A man either love all of me or none of me. And I mean ALL of me. (quoted in Griggs, 1998, p. 93)

Another example of body diversity is that of those people born with intersexed bodies who have been (and often still are) surgically and hormonally fitted into one or the other category as early in their lives as possible. Now, increasingly, people with intersexed bodies who were neither aware of nor able to control such surgical and hormonal intervention are questioning those practices and demanding the right to determine whether, when, and how their bodies should be altered (Chase, 1998; Kessler, 1998).

As we explained earlier, it was the primacy given to gender and specifically gender identity that gave legitimacy to the efforts of the medical profession to change the sex of those seeking to change. By and large, only two gender identities were "allowed": masculine and feminine. Again the dichotomy is being questioned, as there is emerging a diversity of identities "in between" or even "outside" the conventional parameters.

Members of the medical profession—health professionals and therapists, too—have begun to look at their patients or clients in less dichotomous ways. Bockting and Coleman, for example, wrote that their clients "often have a more ambiguous gender identity and are more ambivalent about a gender role transition than they initially admit" (1992, p. 143). Their

treatment program allows their clients, they say, to "discover and express their unique identity" (1992, p. 143) and "allows for individuals to identify as neither man nor woman, but as someone whose identity transcends the culturally sanctioned dichotomy" (1992, p. 144).

We leave the penultimate word to Jason Cromwell, who expresses the idea clearly when he says that "there is more to gender diversity than being transvestite or transsexual . . . there are more than two sexes or genders" (Cromwell, 1999, p. 6). By the same token, there is more to Men and Masculinities Studies than men and masculinities. Therein lies the particular contribution of transgendering to the field.

#### REFERENCES

- Bailey, J. M. (2003). *The man who would be queen: The science of gender-bending and transsexualism*. Washington, DC: John Henry Press.
- Benjamin, H. (1966). *The transsexual phenomenon*. New York: Julian Press.
- Benjamin, H. (1968). *The transsexual phenomenon. Transactions of the New York Academy of Sciences*, 29(4), 428-430.
- Blanchard, R. (1989). The concept of autogynephilia and the typology of male gender dysphoria. *Journal of Nervous and Mental Disease*, 177, 616-623.
- Bockting, W. O., & Coleman, E. (1992). A comprehensive approach to the treatment of gender dysphoria. In W. O. Bockting & E. Coleman (Eds.), *Gender dysphoria: Interdisciplinary approaches to clinical management* (pp. 131-155). New York: Haworth.
- Bornstein, K. (1994). *Gender outlaw: On men, women and the rest of us*. London: Routledge.
- Brake, M. (1976). I may be a queer, but at least I am a man. In D. L. Barker & S. Allen (Eds.), *Sexual divisions and society: Process and change* (pp. 174-198). London: Tavistock.
- Bruce, V. (1967). The expression of femininity in the male. *Journal of Sex Research*, 3(2), 129-139.
- Bullough, V. L., Dorr Legg, W., Elcano, B. W., & Kepner, J. (1976). *An annotated bibliography of homosexuality* (Vol. 2). London: Garland.
- Calafia, P. (1997). *Sex changes: The politics of transgenderism*. San Francisco: Cleis Press.
- Chase, C. (1998). Hermaphrodites with attitude: Mapping the emergence of intersex political activism. *GLQ: A Journal of Lesbian and Gay Studies*, 4(2), 189-211.
- Clare, D. (1984). Transhomosexuality [Abstract]. In *Proceedings of the Annual Conference of the*

- British Psychological Society (p. 6). Warwick, UK: University of Warwick.
- Connell, R. W. (1995). *Masculinities*. Sydney: Allen and Unwin.
- Cooper, V. (1998). Female camp? Drag and the politics of parody and "queer" performance. *Cultural Studies from Birmingham*, 2(1). Retrieved January 16, 2004, from <http://artsweb.bham.ac.uk/bccsr/issue1/cooper.htm>
- Cromwell, J. (1999). *Transmen and FTMs: Identities, bodies, genders, and sexualities*. Urbana: University of Illinois Press.
- Demeyere, G. (1992). *Transvestism and its wider context: A working bibliography*. (Available from G. Demeyere, Turnhoutsebaan 588, B2110 Wijnegem, Belgium)
- Denny, D. (1994). *Gender dysphoria: A guide to research*. New York: Garland.
- Denny, D. (1995). The paradigm shift is here! *Aegis News*, 4, 1.
- Devor, H. (1997). *Female-to-male transsexuals in society*. Bloomington: Indiana University Press.
- Ekins, R. (1997). *Male femaling: A grounded theory approach to cross-dressing and sex-changing*. London: Routledge.
- Ekins, R., & King, D. (1999). Towards a sociology of transgendered bodies. *Sociological Review*, 47(3), 580-602.
- Ekins, R., & King, D. (2001a). Pioneers of transgendering: The popular sexology of David O. Cauldwell. *International Journal of Transgenderism*, 5(3). Retrieved January 23, 2004, from [www.sympoion.com/ijit/cauldwell/cauldwell\\_01.htm](http://www.sympoion.com/ijit/cauldwell/cauldwell_01.htm)
- Ekins, R., & King, D. (2001b). Tales of the unexpected: Exploring transgender diversity through personal narrative. In F. Haynes & T. McKenna (Eds.), *Unseen genders: Beyond the binaries* (pp. 123-142). New York: Peter Lang.
- Ekins, R., & King, D. (2001c). Transgendering, migrating and love of oneself as a woman: A contribution to a sociology of autogynephilia. *International Journal of Transgenderism*, 5(3). Retrieved January 23, 2004, from [www.symphoion.com/ijit/vol05no03\\_01.htm](http://www.symphoion.com/ijit/vol05no03_01.htm)
- Ellis, H. H. (1914). *Man and woman* (5th ed.). London: Walter Scott.
- Ellis, H. H. (1928). *Studies in the psychology of sex* (Vol. 7). Philadelphia: F. A. Davies.
- Feinberg, L. (1996). *Transgender warriors: Making history from Joan of Arc to Dennis Rodman*. Boston: Beacon.
- Feinbloom, D. H., Fleming, M., Kijewski, V., & Schuler, M. P. (1976). Lesbian/feminist orientation among male-to-female transsexuals. *Journal of Homosexuality*, 2(1), 59-71.
- Foucault, M. (1979). *The history of sexuality* (Vol. 1). London: Allen Lane.
- Fulton, R., & Anderson, S. W. (1992). The Amerindian "man-woman": Gender liminality and cultural continuity. *Current Anthropology*, 33(5), 603-610.
- Garber, M. (1992). *Vested interests: Cross-dressing and cultural anxiety*. New York: Routledge.
- Griggs, C. (1998). *She: Changing sex and changing clothes*. Oxford, UK: Berg.
- Halberstam, J. (1998). *Female masculinity*. Durham, NC: Duke University Press.
- Hamburger, C., Stürup, G. K., & Dahl-Iversen, E. (1953). Transvestism: Hormonal, psychiatric and surgical treatment. *Journal of the American Medical Association*, 152(5), 391-396.
- Herd, G. (1994). Preface. In G. Herd (Ed.), *Third sex, third gender: Beyond sexual dimorphism in culture and history* (pp. 11-20). New York: Zone Books.
- Hirschfeld, M. (1923). Die intersexuelle Konstitution. *Jahrbuch für Sexuelle Zwischenstufen*, 23, 3-27.
- Hirschfeld, M. (1938). *Sexual anomalies and perversions*. London: Encyclopaedic Press.
- Hirschfeld, M. (1991). *Transvestites: The erotic drive to cross-dress*. New York: Prometheus. (Original work published 1910)
- Jackson, P. A., & Sullivan, G. (Eds.). (1999). *Lady boys, tom boys, rent boys: Male and female homosexualities in contemporary Thailand*. New York: Harrington Park Press.
- Jacobs, S., Thomas, W., & Lang, S. (Eds.). (1997). *Two-spirit people: Native American gender identity, sexuality, and spirituality*. Urbana: University of Illinois Press.
- Jeffreys, S. (1996). Heterosexuality and the desire for gender. In D. Richardson (Ed.), *Theorising heterosexuality: Telling it straight* (pp. 75-90). Buckingham, UK: Open University Press.
- Jeffreys, S. (2003). *Unpacking queer politics*. Cambridge, MA: Polity.
- Johnson, M. (1997). *Beauty and power: Transgendering and cultural transformation in the southern Philippines*. Oxford, UK: Berg.
- Kessler, S. J. (1998). *Lessons from the intersexed*. New Brunswick, NJ: Rutgers University Press.
- King, D. (1993). *The transvestite and the transsexual: Public categories and private identities*. Aldershot, UK: Avebury.
- Kulick, D. (Ed.). (1998a). Transgender in Latin America [Special issue]. *Sexualities*, 1(3).
- Kulick, D. (1998b). *Travesti: Sex, gender, and culture among Brazilian transgendered prostitutes*. Chicago: University of Chicago Press.
- Lawrence, A. (1999, August). *Men trapped in men's bodies: Autogynephilic eroticism as a motive for seeking sex reassignment*. Paper presented at the 16th Harry Benjamin International Gender Dysphoria Association Symposium, London.
- Mackenzie, G. O. (1994). *Transgender nation*. Bowling Green, OH: Bowling Green University Popular Press.
- Maitland, S. (1986). *Vesta tilley*. London: Virago Press.
- Meyer, J. K., & Hoopes, J. E. (1974). The gender dysphoria syndromes: A position statement on so-called transsexualism. *Plastic and Reconstructive Surgery*, 54(4), 444-451.
- Meyerowitz, J. (2002). *How sex changed: A history of transsexuals in the United States*. Cambridge, MA: Harvard University Press.
- Miss Vera's Finishing School for Boys Who Want to Be Girls. (n.d.). Retrieved January 16, 2004, from [www.missvera.com/book-1.html](http://www.missvera.com/book-1.html)
- Money, J. (1973). Gender role, gender identity, core gender identity: Usage and definition of terms. *Journal of the American Academy of Psychoanalysis*, 1(4), 397-403.
- Money, J., & Tucker, P. (1977). *Sexual signatures: On being a man or a woman*. London: Abacus.
- More, K., & Whittle, S. (Eds.). (1999). *Reclaiming genders: Transsexual grammars at the fin de siècle*. London: Cassell.
- Morris, J. (1974). *Conundrum*. London: Faber and Faber.
- Nanda, S. (1988). *Neither man nor woman: The Hijras of India*. Belmont, CA: Wadsworth.
- Nataf, Z. I. (1996). *Lesbians talk transgender*. London: Scarlet Press.
- Ostow, M. (1953). Transvestism. *Journal of the American Medical Association*, 152(16), 1553.
- Petersen, A. (1998). *Unmasking the masculine: "Men" and "identity" in a sceptical age*. London: Sage.
- Press for Change. (1996). *Transsexualism: The current medical viewpoint*. Retrieved January 16, 2004, from [www.pfc.org.uk/medical/medview](http://www.pfc.org.uk/medical/medview)
- Prince, C. V. (1957). Homosexuality, transvestism and transsexualism: Reflections on their etiology and differentiation. *American Journal of Psychotherapy*, 11, 80-85.
- Prince, V. (1971). *How to be a woman though male*. Los Angeles: Chevalier.
- Prince, V. (1979). Charles to Virginia: Sex research as a personal experience. In V. L. Bullough (Ed.), *The frontiers of sex research* (pp. 167-175). New York: Prometheus.
- Prosser, J. (1997). Transgender. In M. Medhurst & S. Munt (Eds.), *Lesbian and gay studies: A critical introduction* (pp. 309-327). London: Cassell.
- Prosser, J. (1998). *Second skins: The body narratives of transsexuals*. New York: Columbia University Press.
- Ramet, S. (1996). *Gender reversals and gender cultures*. London: Routledge.
- Raymond, J. (1980). *The transsexual empire*. London: The Women's Press.
- Raymond, J. (1994). *The transsexual empire* (2nd ed.). New York: The Teachers Press.
- Riddell, C. (1996). Divided sisterhood: A critical review of Janice Raymond's *The Transsexual Empire*. In R. Ekins & D. King (Eds.), *Blending genders: Social aspects of cross-dressing and sex-changing* (pp. 171-189). London: Routledge.
- Rubin, G. (1992). Of catamites and kings: Reflections on butch, gender and boundaries. In J. Nestle (Ed.), *The persistent desire: A femme-butch reader* (pp. 466-482). Boston: Alyson.
- Sharpe, A. (2002). *Transgender jurisprudence: Dysphoric bodies of law*. London: Cavendish.
- Socarides, C. (1969). The desire for sexual transformation: A psychiatric evaluation of transsexualism. *American Journal of Psychiatry*, 125(10), 1419-1425.
- Socarides, C. (1975). *Beyond sexual freedom*. New York: Quadrangle.
- Steiner, B. W. (Ed.). (1985). *Gender dysphoria: Development, research, management*. New York: Plenum.
- Stekel, W. (1934). *Bi-sexual love*. New York: Physicians and Surgeons Book Co.
- Stoller, R. J. (1968). *Sex and gender: Vol. 1. The development of masculinity and femininity*. New York: Science House.
- Stoller, R. J. (1977). Gender identity. In B. B. Wolman (Ed.), *International encyclopedia of psychiatry, psychology, psychoanalysis and neurology* (Vol. 5, pp. 173-177). New York: Van Nostrand for Aesculapius.
- Stone, S. (1991). *The empire strikes back: A post-transsexual manifesto*. In K. Straub & J. Epstein (Eds.), *Body guards: The cultural politics of gender ambiguity* (pp. 280-304). New York: Routledge.
- Stryker, S. (1999). Portrait of a transfig drag hag as a young man: The activist career of Louis G. Sullivan. In K. More & S. Whittle (Eds.), *Reclaiming genders: Transsexual grammars at the fin de siècle* (pp. 62-82). London: Cassell.
- Teh, Y. K. (2001). Mak nyahs (male transsexuals) in Malaysia: The influence of culture and religion on their identity. *International Journal of Transgenderism*, 5(3). Retrieved January 23, 2004, from [www.symphoion.com/ijit/vol05no03\\_04.htm](http://www.symphoion.com/ijit/vol05no03_04.htm)
- Thom, B., & More, K. (1998). Welcome to the festival. In *The second international transgender film and video festival*. London: Alchemy.
- Totman, R. (2003). *The third sex: Kathoey—Thailand's ladyboys*. London: Souvenir Press.
- Volcano, D. (2000). *Sublime mutations*. Tübingen: Konkursbuch.
- Volcano, D., & Halberstam, J. (1999). *The drag king book*. London: Serpent's Tail.



- Whitehead, H. (1981). The bow and the burden strap: A new look at institutionalised homosexuality in native North America. In S. B. Ortner & H. Whitehead (Eds.), *Sexual meanings* (pp. 80-115). Cambridge, UK: Cambridge University Press.
- Whittle, S. (1996). Gender fucking or fucking gender? Current cultural contributions to theories of gender blending. In R. Ekins & D. King (Eds.), *Blending genders: Social aspects of cross-dressing and sex-changing* (pp. 196-214). London: Routledge.
- Wikun, U. (1977). Man becomes woman: Transsexualism in Omar as a key to gender roles. *Man*, 12(2), 304-319.
- Wilchins, R. (1997). *Read my lips: Sexual subversion and the end of gender*. Ithaca, NY: Firebrand Books.
- Winter, S. (2002). *Why are there so many Kathoey in Thailand?* Unpublished manuscript. Retrieved January 23, 2004, from [http://web.hku.hk/~sjwinter/TransgenderASIA/paper\\_why\\_are\\_there\\_so\\_many\\_kathoey.htm](http://web.hku.hk/~sjwinter/TransgenderASIA/paper_why_are_there_so_many_kathoey.htm)
- Winter, S., & Udomsak, N. (2002). Male, female and transgender: Stereotypes and self in Thailand. *International Journal of Transgenderism*, 6(1). Retrieved January 23, 2004, from [www.symposium.com/ijt/ijto06no01\\_04.htm](http://www.symposium.com/ijt/ijto06no01_04.htm)
- Young, A. (2000). *Women who become men: Albanian sworn virgins*. Oxford, UK: Berg.

## PART V

### POLITICS